

ATTACHMENT 5
HEARING AID DEALER SERVICES
Effective July 1, 1990

ALLOWABLE PLACE OF SERVICE (POS) TABLE

<u>POS</u>	<u>Description</u>
1	Inpatient Hospital
3	Office
4	Home
7	Nursing Home
8	Skilled Nursing Facility

ALLOWABLE TYPE OF SERVICE (TOS) TABLE

<u>TOS</u>	<u>Description</u>
P	Purchase
R	Rental